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FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZA	ATION		
i Oitiwi i	(See instruction	ons)		Office use only
NAME OF COMMITTEE (in formal committee)	(Check if name is changed)	Example: If typying, typ over the lines	e 12FE4M5	
Waste Manage	ment Employees Better Govern	ment Fund		
ADDRESS (number and st	701 Pennsylvania Av	ve., NW	111111	
(Check if address is changed)	Suite 590	<u> </u>	111111	
	Washington		<u> </u> PC	20004 -
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAIL	ADDRESS (Please provide only one e-	mail address)		
(Check if address is changed)	wmpac@wm.com			
COMMITTEE'S WEB F	PAGE ADDRESS (URL)			
(Check if address is changed)		11111111	111111	
			111111	
0 2175 4 4	/ D D / Y Y Y Y			
2. DATE	/ D 2 4 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICAT	TION NUMBER	C C00119008		
4. IS THIS STATEME	ENT NEW (N) OR	X AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my kno	owledge and belief it is true, cor	rect and complete	
	Dahaut Cimmaan	<u> </u>		
Type or Print Name of T	reasurer Robert Simpson	l		
Signature of Treasurer	Electronically Filed by Robert Si	mpson	Date 0,3	7 2 4 7 2 0 0 9
NOTE: Submission of fals	se, erroneous, or incomplete information ma			
Office Use Only		For further inform Federal Election Co Toll Free 800-424-5	ation contact:	FEC FORM 1 (Revised 02/2009)